PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUL FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

or Fax

| INSTRUCTIONS: Thi appropriate. All furthe indicated unless correct | s form should be used r correspondence includ ted below or directed o | for transmitting the IS ing the Patent, advance therwise in Block 1, by | SUE FEE and PUBLIC orders and notification (a) specifying a new c | CATION FEE (if re of maintenance fees orrespondence addre | quired). Block s will be mailess; and/or (b) | cs 1 through 5 s ed to the current indicating a sepa | hould be completed wher correspondence address a arate "FEE ADDRESS" fo |
|---|---|--|--|---|---|--|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission. | | | |
| 2018 POWERS SUITE 800 | ROFF GREENW FERRY ROAD | | UEVA. PC | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | |
| ATLANTA, GA | X 30339 | | | Bradley K. Groff | | | (Depositor's name) |
| | | | | Jun 3 | L.C. | BOLDEL BUT PORTON CONTROL PROVIDE STATE OF THE STATE OF T | (Signature) |
| | | | | December | 15, 20 | 08 | (Date) |
| APPLICATION NO. | FILING DATE | очения в нед функция нед в до торого условняющей нед выполня для выполнения условняющей угод, выполняющей | FIRST NAMED INVENTO | | OR A'TTORNEY DOCKET NO. | | CONFIRMATION NO. |
| 10/598,439 06/28/2007 | | | Bradley Koeppel | entri vivid di menengkala kerji kasaki peruni di metajuming ya metajuma ya sipari i quany, apinya penj | 2G02.1-191 | | 5110 |
| TITLE OF INVENTION | : COMPACT MULTI-U | SE LANCING DEVIC | 5 | | | | |
| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DO | PREV. PAID ISSU | JE FEE TOT | TAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1440 | \$300 | \$0 | \$0 \$1740 | | 01/02/2009 |
| EXAMINER ART UNIT | | | CLASS-SUBCLASS | | | | |
| EREZO, D. | ARWIN P | 3773 | 606-182000 | noune-just [®] | | | |
| | nce address or indication ondence address (or Char /122) attached. cation (or "Fee Address" 2 or more recent) attache | nge of Correspondence | | | | | |
| 3. ASSIGNEE NAME AN | ID RESIDENCE DATA | TO BE PRINTED ON T | THE PATENT (print or | ype) | *************************************** | | Market same same springer de plant de same same service de sante de la same de la presentación de la same de p |
| (A) NAME OF ASSIG | | | (B) RESIDENCE: (CIT | | | d below, the doc | ument has been filed for |
| Please check the appropria | te assignee category or c | ategories (will not be pri | inted on the patent); | Individual 🗸 Co | orporation or of | ther private group | entity Government |
| | e submitted: small entity discount pe of Copies | rmitted) | 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1513 (enclose an extra copy of this form). | | | | |
| | SMALL ENTITY status. | See 37 CFR 1.27. | ☐ b. Applicant is no lo | nger claiming SMAL | L ENTITY sta | itus. See 37 CFR | 1.27(g)(2). |
| NOTE: The Issue Fee and Interest as shown by the rec | Publication Fee (if require cords of the United States | red) will not be accepted a Patent and Trademark (| from anyone other than Office. | the applicant; a regis | tered attorney | or agent; or the a | ssignee or other party in |
| Authorized Signature | fre the | 7 | The Control of the Co | Date Dece | | | |
| Typed or printed name | | THE PERSON NAMED OF THE PE | Registration No | | | NEARCH A STANLE AT LINE OF THE CONTROL OF THE CONTR | |
| This collection of informati an application, Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg | on is required by 37 CFI ity is governed by 35 U pplication form to the U s for reducing this burde inia 22313-1450. DO N | R 1.311. The information S.C. 122 and 37 CFR 1. SPTO. Time will vary d n, should be sent to the OT SEND FEES OR CO | is required to obtain or 14. This collection is es epending upon the indi- Chief Information Offic OMPLETED FORMS T | retain a benefit by the timated to take 12 m vidual case. Any con or, U.S. Patent and T O THIS ADDRESS. | e public which inutes to comp iments on the rademark Offi SEND TO: Co | is to file (and by blete, including gr amount of time y ce, U.S. Departm ommissioner for I | the USPTO to process) athering, preparing, and you require to complete ent of Commerce, P.O. Patents, P.O. Box 1450. |

Box 1450, Alexandria, Virginia 22 Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.